

## Substance Use Problems Among Older Adults

Substance abuse among older adults is an invisible epidemic.<sup>1</sup>

▲ Alcohol and prescription drug problems affect up to 17% of older Americans.<sup>1</sup>

▲ The rate of alcohol-related hospitalizations is roughly equal to that of heart attacks.<sup>1</sup>

As the aging population grows, the treatment needs of older adults will significantly rise. By addressing the unique issues associated with aging and substance use, treatment providers can improve the health—and quality of life—of countless older adults.

### Issues Facing Older Adults

#### Medical risks

- ▲ Physiological changes related to aging (e.g., decrease in alcohol and drug metabolism) that cause stronger and longer lasting effects from substance use
- ▲ Health problems triggered or worsened by misuse/abuse/addiction
- ▲ Harmful reactions and interactions from using many prescriptions, over-the-counter drugs, and herbal remedies, especially when combined with alcohol
- ▲ Pain and discomfort, including sleep problems, from various physical and mental health conditions that may lead to self-medication with alcohol or drugs
- ▲ Incorrect use of medications (e.g., misunderstanding directions, forgetting to take them)

#### Psychosocial and other issues

- ▲ Loss of friends/family members, decreased social status and/or professional identity, reduced self-esteem, hopelessness, isolation, loneliness, boredom
- ▲ Problems with self-care, poor eyesight/hearing, loss of mobility, lack of transportation, financial issues
- ▲ Greater chance of unidentified and untreated substance use problems (e.g., due to stigma/denial, symptoms mistaken for other conditions, lack of awareness of symptoms)

### Communicating with Older Adults

- ▲ Show respect (e.g., address the patient according to his/her preference; do not condescend).
- ▲ Stress confidentiality to help patients speak more openly.
- ▲ Be gentle, empathetic, and non-confrontational—without minimizing the problem—to help patients overcome shame/guilt issues regarding substance use.
- ▲ Be supportive. Show confidence in the patient's ability to succeed in treatment.
- ▲ Consider hearing and visual problems and language barriers (e.g., use large-print materials, settings with good light and little noise, translators).
- ▲ Be patient and persistent. Repeat messages to aid memory and understanding, and to motivate change.
- ▲ Speak slowly and use clear language, without being patronizing; provide information in small “chunks” that older adults can easily absorb.

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## Treatment Approaches

Tailor goals, setting, and length of treatment to each patient, his/her readiness to change, and his/her different needs over time. Some general treatment strategies are listed below.

### Making Connections

- ▲ Consider screening triggers (e.g., major life transitions; physical symptoms like sleep problems, frequent falls, and cognitive impairment) and use appropriate screening tools to identify older adults needing treatment (see [www.maclearringhouse.com/PDFs/SubstanceAbuse/ProviderUpdate.pdf](http://www.maclearringhouse.com/PDFs/SubstanceAbuse/ProviderUpdate.pdf)).
- ▲ Coordinate care with the patient's primary care physician and other health care providers.
- ▲ Link patients to medical care for co-occurring health problems and to services that support independence (e.g., primary care, home care, social services, faith communities if appropriate).
- ▲ Involve family members when/if appropriate.
- ▲ Provide age-specific group treatment; if not possible, group older and younger adults who will feel comfortable together or whose lifestyles/problems are similar.
- ▲ Provide a continuing care plan that links patients to older-adult-friendly groups (e.g., AA), medical care, and support services.

### Addressing Special Needs

- ▲ Consider the different needs of patients with late-onset substance use problems versus those with early-onset problems.
- ▲ Educate patients about aging and substance use (e.g., risks, taking medications properly).
- ▲ Address life changes and help patients understand possible reasons for their difficulties with substances.
- ▲ Motivate older adults to follow treatment recommendations by focusing on their greatest concerns (e.g., staying healthy and independent).
- ▲ Teach patients ways to cope with depression, loneliness, and loss.
- ▲ Work with patients to build their self-esteem and social support networks.
- ▲ Make sure detoxification procedures meet the special needs of older adults (e.g., appropriate doses of stabilizing medications and hospital stays).
- ▲ Help patients identify and manage triggers of misuse/abuse/addiction.

### RESOURCES:

- ▲ MA Executive Office of Elder Affairs, 800-AGE-INFO, [www.800ageinfo.com](http://www.800ageinfo.com)
- ▲ MassMedLine, 866-633-1617, [www.massmedline.com](http://www.massmedline.com)
- ▲ MA Substance Abuse Information & Education Helpline, 800-327-5050, [www.helpline-online.com](http://www.helpline-online.com)
- ▲ Bureau of Substance Abuse Services, MA Department of Public Health, [www.state.ma.us/dph/bsas](http://www.state.ma.us/dph/bsas)
- ▲ National Clearinghouse for Alcohol and Drug Information, 800-729-6686, [www.health.org](http://www.health.org)
- ▲ National Institute on Alcohol Abuse & Alcoholism, [www.niaaa.nih.gov](http://www.niaaa.nih.gov)
- ▲ National Administration on Aging, 202-619-0724, [www.aoa.dhhs.gov](http://www.aoa.dhhs.gov)

References: <sup>1</sup>Center for Substance Abuse Treatment. Substance Abuse Among Older Adults: Tip 26, 1998; National Institute on Aging. Working with Older Patients: A Clinician's Handbook

Produced by the MA Health Promotion Clearinghouse, The Medical Foundation. Visit [www.maclearringhouse.com](http://www.maclearringhouse.com) to request additional copies, download a PDF version, or order consumer materials on elder substance use and other health topics.